Mesabi Range Community and Technical College

Post Secondary Enrollment Options Program

Guidance Counselor or Home School Parent Form

Please complete the following information:

PSEO Applicant's Name:_____

Student's Percentile Rank in Class:_____

Overall GPA is:_____

*If class rank or GPA are under required levels, please provide justification for referring this student to the PSEO program. Attach a statement of justification to the application.

1. Number of high school credits needed for graduation:_____

2. What specific areas are credits needed to graduate, (i.e., English, Social Studies, Math, etc.)

Subject	Credits Needed
_____	_____
_____	_____
_____	_____
_____	_____

- **It takes 4 credits of MRC coursework to complete 1 high school credit.**
- **Textbooks purchased for this program are the property of MRC. Students are instructed to return books to their PSEO Advisor.**

_____
High School Name

_____
High School Address City State Zip Code

_____
Phone Number

_____
High School Principal/Counselor or Home School Parent (Please Print)

_____ _____
(Signature) of Principal/Counselor or Home School Parent Date